

Rhode Island

Long-Term-Care-Coordinating Council



Legislation

Advocacy

Education

Information



Research

Policy

Planning

Coordination



2005 Annual Report

Lt. Governor Charles J. Fogarty
Chairman

"Working Together: Making All the Pieces Fit"
January 2006



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■ Message From the Chairman
Lieutenant Governor Charles J. Fogarty

January, 2006

In 2005 the Long-Term-Care-Coordinating Council continued to pursue its long term care reform agenda. A high priority was advocating for passage of the “Germaine Morsilli Act” and other legislation it recommended based on the findings of the Council’s Nursing Facility Closure Task Force. I convened this Task Force in June of 2004 to investigate the closing of Hillside Health Center in Providence. Hillside had been cited on numerous occasions for the poor care received by residents including Germaine Morsilli, an 87-year old resident who suffered from serious improperly treated bed sores at Hillside before the state finally ordered her moved to another nursing home where she died a short time later. Key elements of the legislation included: (1) financial triggers to keep tabs on troubled facilities; (2) family notification and resident council provisions; (3) appointment of independent quality consultants to ensure compliance; (4) increased accountability for nursing home operators and managerial staff; and (5) reporting of staff and staff turnover levels including use of pools.

The Task Force report and legislation provided a valuable foundation for the 2005 legislature. To a great extent, the recommendations were included in the long term care reforms signed into law on July 5th. But, our job is not over. We must carefully monitor the reforms to make sure they are enforced and to give families confidence that our state’s nursing home residents receive quality care.

The Council continued advocating in 2005 to expand affordable home and community care options and provide more equitable payments for these providers so that low-income persons have greater care choices. Although the legislature did not fund the additional 180 units of assisted living previously approved by CMS, it did provide funds to allow 120 more persons to access assisted living under the DEA home and community waiver program.

The affordability of Rx drugs for seniors and persons with disabilities continued as a priority in 2005 and the Council worked to secure a state “wrap-around” program to work with the new Medicare Part D program starting on January 1, 2006. Although this effort was not successful, the legislature did preserve RIPAE, which can fill some of the gap in Medicare Part D.

I extend my sincere thanks to all members of the Council for their continued commitment. I look forward to making further progress as we seek a system that provides affordable and quality long term care for all in need.

Sincerely,

Charles J. Fogarty
Lieutenant Governor
Chairman, Long-Term-Care Coordinating Council

■ BACKGROUND OF THE LONG-TERM-CARE-COORDINATING COUNCIL

The RI Long-Term-Care-Coordinating Council was established in 1987 by legislation proposed by former Lt. Gov. Richard A. Licht (Rhode Island General Law 23-17.3). By law, the council's purpose is "to develop and coordinate state policy concerning all forms of long-term health care for the elderly and adults with chronic disabilities and illnesses, ranging from at-home and community based care and respite care through intensive nursing care to long-term hospital care." The Council carries out its charge by bringing together leaders from the private and public sectors to coordinate and set the state's long-term care agenda. The thirty-seven-member council includes elected officials, consumers, state agency directors, advocates, and providers of long-term care.

In 1994, the Council published *LONG-TERM CARE PLAN FOR RHODE ISLAND: 1995-2000. Working Together- Making All the Pieces Fit*. The state long term care plan is intended to move the public and private agencies in the state which either fund, regulate or provide long term care in accord with the following guiding principles:

- To recognize that the need for long term care will continue to grow, and will continue to be a major budget concern for the state.
- To expand efforts that support the many Rhode Island families who shoulder the burden of providing care for a loved one.
- To shape services to fit the consumers and their situations.
- To redesign the way that long term care services are paid for, in such a way that promotes prevention, early screening, and care in the most appropriate and least costly ways.
- To adopt a uniform set of questions to be used by a network of qualified and objective "screeners/case managers" who will work with families to determine their needs and the best possible options for care.
- To continually improve the quality of care provided, taking into account consumer satisfaction, and seeking high standards for state oversight.
- And, in every way, to attempt to help people in need by clearing away unnecessary hurdles to receiving care in the most appropriate and timely fashion.

CHAIRPERSONS OF THE COUNCIL

1987-1988: Lieutenant Governor Richard A. Licht
1989-1992: State Representative Neil A. Corkery
1993-1996: Lieutenant Governor Robert A. Weygand
1996-present: Lieutenant Governor Charles J. Fogarty

■ **LONG-TERM-CARE-COORDINATING COUNCIL**
(Membership as of December 1, 2005*)

Lieutenant Governor Charles J. Fogerty, Chairman
Neil Corkery, Co-Vice Chairman
Anna Tucker, Co-Vice Chairwoman
E. Naomi Craig, Secretary

Senator June Gibbs, Co-Chair Legislation Committee
Senator Elizabeth Roberts
Representative Peter Ginaitt, Co-Chair Legislation Committee
Representative Bruce Long
Secretary Of State Matthew Brown
Maria Barros
Mary Benway
Corinne Calise-Russo
Kathleen Carland
Cynthia Conant-Arp
Kathleen Connell
Dr. Herbert Constantine
Robert DiCenso
Elizabeth Earls
James Flanagan
Dr. David Gifford
Jane Hayward
Roberta Hawkins
William Jackson
Dr. Louis Marino
Elizabeth Morancy
Anna Prior
Patrick Quinn
Nancy Roberts
Angelo Rotella
Raymond Rusin
Alfred Santos
Bonnie Sekeres
Karen Smith
Cindy Soccio
Kathleen Spangler
Susan Sweet
Sr. Marietta Walsh

Staff

Maureen Maigret, RN, MPA
Executive Director

Donna Rotondi
Executive Assistant

- * Council members serve until re-appointed or until a new member is appointed

Section 1. Recommendations for 2006

In 2006 the work of the Long Term Care Coordinating Council will be guided by the 2006 Work Plan adopted at the Council's January 11, 2006 meeting and presented below. Key activities include actions to: implement the recommendations from the Task Force on Nursing Facility Closures through legislative and other means; seek equitable payment for home and community care providers; address service gaps which diminish long term care options for low income persons such as exist for assisted living; assuring Rx drugs are affordable for seniors and persons with disabilities.

2006 WORK PLAN (as approved on January 11, 2006)

The Work Plan recommendations are based on the principles, goals and objectives of the Long-Term-Care Coordinating Council's State Plan. In many instances they are activities initiated or recommended in previous years but not yet fully implemented. Implementing these recommendations will require the cooperation and collaboration of all the public and private participants involved in the work of the Council.

SYSTEM INFRASTRUCTURE

1. Develop and implement a long-term-care information system, including resource needs, which will serve as interdepartmental data and planning resource for long term care. **Lead agency: DHS**

Recommended Action for 2006:

Continue with DHS as Lead Agency making progress reports to LTCCC

2. Implement a statewide computerized long-term-care information resource guide with public, consumer-friendly interactive web access. **Lead Agencies: DHS and DEA**

Recommended Action for 2006:

Continue as Action Step with DHS as Lead Agency for implementing interactive, web-based elements with progress reports to LTCCC

3. Support adequate resources for HEALTH to comply with state and federal long term care survey requirements and to investigate complaints in a timely and effective manner.

Lead Agency: HEALTH and LTCCC

Recommended Action for 2006:

1. Monitor HEALTH's long term care survey and enforcement capacity and progress in meeting statutory and regulatory timeframes through periodic reports to LTCCC
2. Support legislation to specifically declare that assisted living inspections will be done annually and to develop methodology for designating substandard care with appropriate follow up action

4. Support implementation of system-wide long-term care entry system as mandated by RIGL 42-66-4(b) and envisioned in "ONE STOP" grant project to include the resources and policy reforms needed to adopt a statewide counseling and assessment program for long term care. **Lead Agency: DEA**

Recommended Action for 2006:

1. Support public education and marketing program for THE POINT.
2. Monitor policy development regarding streamlining long term care entry system by DHS and DEA including common assessment programs

5. Monitor implementation of RI PACE (Program of All-Inclusion Care for the Elderly) program as a model to demonstrate an integrated care model. **Lead Agencies: DHS and LTCCC**

Recommended Action for 2006:

1. Monitor enrollment and program through periodic reports to the LTCCC.
6. Continue to review service use and to identify needs of minority elders. **Lead Agencies: LTCCC, Minority Elder Task Force**
Recommended Action for 2006:
Work with Elder Minority Task Force to identify priority issues and develop action steps accordingly. **Lead Agencies: LTCCC, Minority Elder Task Force**
7. Continue to review state long term care spending and utilization trends and to study system demand and capacity for addressing future needs including those of "baby boomers". **Lead Agencies: LTCCC, DEA, AARP**
Recommended Action for 2006:
 1. Prepare LTC FY2005 Budget Report
 2. Continue to monitor system capacity, demand and resource issues
 3. Review studies contracted by DHS in response to S1138/H6552 passed in 2005 and make appropriate recommendations (See Item #13)
8. Continue to implement 1998 Health Care Quality Measurement and Reporting Law as it relates to long-term-care facilities. **Lead agency: HEALTH and Quality Partners of RI**
Recommended Action for 2006:
LTCCC members will continue to participate in quality reporting program for long term care providers with first round of public reports on nursing home satisfaction targeted for release mid-year.
9. Continue to address long-term care workforce issues, including professional nurse shortage in long-term care industry and issues relating to certified nursing assistants. **Lead Agency: LTCCC, HEALTH, DHS and provider organizations**
Recommended Action for 2006:
 1. Continue to monitor use of new state resources for nurse education programs.
 2. Support legislation to provide state financial assistance for nursing students.
 3. Continue to work with SHAPE II Nursing Workforce committee.
 4. Support equity adjustments for nursing faculty at state colleges.
10. Support efforts to continue to work toward fair and rational payment methods for all long term care providers. **Lead Agencies: LTCCC, Provider and advocacy groups**
Recommended Action for 2006:
 1. Monitor progress and findings of DHS Study.
 2. Advocate to implement COLA's and adequate base rates for home and community providers.
 3. Monitor subsidized services for development of waiting lists or provider/worker shortages.

SYSTEM COMPONENTS

Nursing Facilities

11. Implement recommendations of the Nursing Facility Closure Task Force through legislation, administrative policy, advocacy and support for funding as appropriate. **Lead agency: LTCCC**
Recommended Action for 2006:
 1. Monitor implementation of 2005 Long Term Care Reform legislation
 2. Continue to work with Quality Partners of RI and other LTC stakeholders to ensure that concepts related to culture change as discussed during "Quality Innovations in Nursing Home Work and Care" are being implemented and transforming nursing home care in RI.
12. Continue to address problems in providing oral (dental) health care for nursing home residents, other long term care clients and elders with low incomes and to seek viable solutions to address the service gaps in this area. **Lead agencies: DHS, Providers, Alliance for Better Long Term Care and Senate Commission on Oral Health**
Recommended Action for 2006:

1. Support development, with appropriate funding and state reimbursement, of new oral health care delivery models for long term care residents and clients.

Home and Community Services

13. Continue to promote adequate and equitable funding for home and community-based services including supportive services such as information and counseling, transportation, supportive housing and family caregiver assistance programs that allow persons to remain in home and community environments.
- 13.1. Work to secure additional state budget funds to increase access for low income persons to assisted living waivers and study funding methods for assisted living services in order to reach a consensus for reimbursement for this service in future years.

Lead agency: LTCCC

- 13.2 Support implementation of a community provider index as recommended by Legislative Study Commission. **Lead agency: Commission Chairman, Providers**

Recommended Action for 2006:

1. Continue Item #13 as Priority Action for 2006
2. Review reports of consultant studies commissioned by DHS in accordance with S1138 and H6552 and make appropriate recommendations based on findings.

14. Develop appropriate model(s) and implementation plan to address behavioral health needs of persons using the state enhanced SSI program for assisted living.

Lead agencies: LTCCC and DHS working with provider and advocacy organizations

Recommended Action for 2006:

Develop new model to provide behavioral health services to persons in need of supervised residential placement such as that provided by assisted living

Rx DRUGS

15. Continue to advocate for affordable Rx drugs for the elderly and persons with chronic illnesses.

Lead agency: LTCCC

16. Examine impact of federal Medicare Reform (MMA-Medicare Part D) on state RIPAE and Medicaid program and suggest state action as appropriate.

Lead agencies: DHS and DEA

Recommended Action for 2006:

1. Advocate for full coordination of RIPAE and Medicare Part D
2. Advocate for federal change to exempt persons on Medicaid home and community waivers from Part D co-payments
3. Address affordability of co-payments for dual eligible persons

FINANCING

17. Continue to examine the role of and promote long-term-care insurance in financing long-term care.

Lead agency: LTCCC

Recommended Action for 2006:

Advocate for federal legislation to expand Long Term Care Insurance Partnerships and support legislation to authorize state to develop such a partnership if permitted by Congress

18. Continue to seek federal reform to provide equitable payment in Medicare and Medicaid for funding for long-term-care and skilled nursing and therapeutic services and to oppose proposed federal reforms in Medicare and Medicaid harmful to consumers and providers and that would negatively impact state finances.

Lead agency: LTCCC

Recommended Action for 2006:

Continue to monitor federal proposals and to advocate against federal initiatives harmful to Rhode Island long term care beneficiaries.

DISABILITY PREVENTION

19. Continue work of RI Fall Prevention Partnership by participation in the Department of Health's Subcommittee on Fall Injury Prevention.

Lead agency: LTCCC

Recommended Action for 2006:

LTCCC members will participate in HEALTH's ongoing work and committee to implement the State's objectives for fall prevention for seniors.

HOMELAND SECURITY – EMERGENCY PREPAREDNESS (New for 2006)

20.1. Review current requirements relating to emergency preparedness and homeland security for long term care providers and clients and make appropriate recommendations for revisions to requirements.

20.2 Participate in planning activities of lead state agencies such as HEALTH and EMA in assessing need and developing implementation plans for long term care emergency preparedness.

20.3. Disseminate information to LTCCC members and interested persons regarding state agency activities and responsibilities in long term care emergency preparedness. **Lead agency: LTCCC**

Section 2. 2005 Long Term Care Coordinating Council Activities

Meeting Dates

During 2005 the full Council held nine regular meetings on the dates listed below. Copies of all Council meeting minutes are maintained in the office of the Chairman, Lieutenant Governor Charles J. Fogarty and can also be found on the Secretary of State's web page at <http://www.sec.state.ri.us/>.

| | | |
|------------|------------|-------------|
| January 12 | May 11 | November 9 |
| February 2 | June 8 | December 14 |
| March 9 | October 12 | |

Scope of Work

The Long-Term-Care-Coordinating Council works in four major areas to accomplish its mission: (1) the development and support of legislation; (2) advocacy; (3) public information and education; and (4) planning, research and policy development.

To guide its activities for 2005, the Council adopted a Work Plan based on the Goals, Objectives and Action Steps of the State Long Term Plan adopted in 1994 and revised in 2000. A summary of the Council's 2005 activities in each of the four major areas of its work follows. Also, an end-of-year status report on the council's 2005 Work Plan is found in Section 3.

■ LEGISLATION

Each year the Long-Term-Care Coordinating Council convenes its Legislative Committee co-chaired by Senator June Gibbs and Representative Peter Ginaitt to suggest legislative initiatives for recommendation to the full Council. Following is a list of bills introduced into the 2005 legislature at the request of Lt. Gov. Fogarty upon the

Council's recommendation or legislation related to long-term care that was reviewed by the Council and formally supported or opposed by the Council. The full text of all bills can be found at the RI General Assembly website at www.rilin.state.ri.us/gen_assembly.

H5181 (Lt. Governor)

BY McNamara, Ginaitt, Costantino, Fox, and Kennedy

AN ACT RELATING TO HEALTH AND SAFETY – NURSING FACILITY QUALITY IMPROVEMENT AND REFORM (GERMAINE MORSILLI ACT)

Summary: This act, referred to as the “Germaine Morsilli Act” would adopt further requirements to strengthen state oversight of nursing facilities and to improve the quality of care of nursing facility residents.

Status: Heard and held for further study. Major provisions of bill incorporated into **H6551A** which passed into law (**Public Law #226**) and other components of 2005 Long Term Care Reform act (See **Public Laws #'s 156/248, 158/247 and 159/226**).

S67 (Lt. Governor)

BY Perry, Roberts, Tassoni, P Fogarty, and Polisena

AN ACT ADOPTING FURTHER REQUIREMENTS TO STRENGTHEN STATE OVERSIGHT OF NURSING FACILITIES AND TO IMPROVE THE QUALITY OF CARE OF NURSING FACILITY RESIDENTS.

Summary: This act, referred to as the “Germaine Morsilli Act” would adopt further requirements to strengthen state oversight of nursing facilities and to improve the quality of care of nursing facility residents. This act would take effect upon passage.

Status: Heard and held for further study. Major provisions of bill incorporated into **S1135A** which passed into law (**Public Law 157**) and other components of 2005 Long Term Care Reform act (See **Public Laws #'s 156/248, 158/247 and 159/226**).

H5300 (Lt. Governor)

BY Slater, Ginaitt, Diaz, Williams, Almeida

AN ACT RELATING TO HUMAN SERVICES -- ESTABLISHING A LONG-TERM CARE IMPROVEMENT FUND

Summary: This act would provide that all monies received by the state from the federal government as a result of the imposition of civil monetary penalties on nursing facilities by the federal government pursuant to 488.444 42 CFR Chapter IV shall be deposited in the long-term care improvement trust fund to be administered by the department of human services.

Status: Heard and held for further study

S139 (Lt. Governor)

BY Connors, Perry, Gallo, Doyle, Polisena

ENTITLED, AN ACT RELATING TO HUMAN SERVICES -- ESTABLISHING A LONG-TERM CARE IMPROVEMENT FUND

Summary: This act would provide that all monies received by the state from the federal government as a result of the imposition of civil monetary penalties on nursing facilities by the federal government pursuant to 488.444 42 CFR Chapter IV shall be deposited in the long-term care improvement trust fund to be administered by the department of human services.

Status: Heard and held for further study

H5295 (Lt. Governor)

BY Ginaitt, Anguilla, Slater, Dennigan

AN ACT RELATING TO EDUCATION - NURSING LOAN REPAYMENT PROGRAM

Summary: This act would provide for student loan forgiveness under the state nursing loan

repayment program and annually appropriate \$250,000 for matching funds. This act would take effect upon passage.

Status: Heard and held for further study

S203 (Lt. Governor)

BY Polisen, Roberts, Sosnowski, Goodwin, Perry

AN ACT RELATING TO EDUCATION - NURSING LOAN REPAYMENT PROGRAM

Summary: This act would provide for student loan forgiveness under the state nursing loan repayment program and annually appropriate \$250,000 for matching funds.

Status: Heard and held for further study

H5142 (Lt. Governor)

BY Gallison, Malik, Anguilla, Lewiss, Schadone

AN ACT RELATING TO HUMAN SERVICES -- LONG TERM HOME HEALTH CARE

Summary: This act would require that the department of human services fund the number of additional persons approved by Medicare and Medicaid to receive assisted living support services; and would expand the medical assistance categories reported in the caseload estimating conference to include home care, adult day services, assisted living services, and waiver programs.

Status: Heard and held for further study. FY2006 Budget Act includes \$314,365 in added state funding for the Department of Elderly Affairs to add 20 units of assisted living per month in its home and community care waiver program starting January 2006.

S262 (Lt. Governor)

BY Alves, Polisen, Gallo, Badeau, Walaska

AN ACT RELATING TO HUMAN SERVICES - LONG-TERM HOME HEALTH CARE

Summary: This act would require that the department of human services fund the number of additional persons approved by Medicare and Medicaid to receive assisted living support services; and would expand the medical assistance categories reported in the caseload estimating conference to include home care, adult day services, assisted living services, and waiver programs.

Status: Heard and held for further study. FY2006 Budget Act includes \$314,365 in added state funding for the Department of Elderly Affairs to add 20 units of assisted living per month in its home and community care waiver program starting January 2006.

H5281 (Lt. Governor)

BY Ginaitt, Gemma, Naughton, McNamara

AN ACT RELATING TO HEALTH AND SAFETY -- LICENSING OF HEALTH CARE FACILITIES

Summary: This act would expand from statewide to national the criminal records check for persons seeking employment in a nursing facility.

Status: Heard and transferred to House Finance

S334 (Lt. Governor)

BY Polisen, Damiani, Goodwin, Sosnowski

AN ACT RELATING TO HEALTH AND SAFETY - LICENSING OF HEALTH CARE FACILITIES

Summary: This act would expand from statewide to national the criminal records check for persons seeking employment in a nursing facility.

Status: Heard and transferred to House Finance

H5294 (Lieutenant Governor)

BY Ginaitt, Gemma, McNamara, Anguilla

AN ACT RELATING TO TAXATION -- PERSONAL INCOME TAX

Summary: This act would provide for a long-term care insurance tax credit. This act would take effect upon passage and would apply to tax years beginning January 1, 2006.

Status: Heard and held for further study.

S658 (Lieutenant Governor)

BY Roberts, Bates, Gibbs, Felag, Paiva-Weed

AN ACT RELATING TO TAXATION -- PERSONAL INCOME TAX

Summary: This act would provide for a long-term care insurance tax credit. This act would take effect upon passage and would apply to tax years beginning January 1, 2006.

Status: 04/05/2005 Committee recommended measure be held for further study

H5332 (Lt. Governor)

BY Sullivan, Anguilla, Slater, Williams, Landroche

AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- PHARMACEUTICAL ASSISTANCE ELDERLY PROTECTION ACT OF 2005 02/03/

Summary: This act would promote coordination of benefits between the elderly pharmaceutical assistance program and Medicare Part D prescription drug program by authorizing the state to pay for premiums and co-payments required under Medicare Part D for RIPAE enrollees.

Status: Heard and held for further study. Article 28 of FY2006 Budget Act (H5270Aa/Public Law117) provides that RIPAE enrollees who meet financial criteria for the Medicare Part D low-income benefit to apply for Medicare Part D.

S522 (Lt. Governor)

BY Roberts, Goodwin, Fogarty P, Gallo, Sheehan

AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- PHARMACEUTICAL ASSISTANCE ELDERLY PROTECTION ACT OF 2005

Summary: This act would promote coordination of benefits between the elderly pharmaceutical assistance program and Medicare Part D prescription drug program by authorizing the state to pay for premiums and co-payments required under Medicare Part D for RIPAE enrollees. This act would take effect upon passage.

Status: Heard and held for further study. Article 28 of FY2006 Budget Act (H5270Aa/Public Law117) provides that RIPAE enrollees who meet financial criteria for the Medicare Part D low-income benefit to apply for Medicare Part D.

H5726 (Lt. Governor)

BY Ginaitt, McNamara, Anguilla, Naughton

AN ACT RELATING TO HEALTH AND SAFETY -- HEALTH CARE FACILITIES

Summary: This act would require nursing facilities to post in a public place in each nursing care unit the number and type of nursing staff on duty and provide an annual report on nursing staff ratios.

Status: Heard and held for further study. Provisions of bill incorporated into H6550A/Public Law 249 and S1135A/Public Law 157 (The Germaine Morsilli Act) and enacted into law.

S553 (Lt. Governor)

BY Roberts, Polisena, Tassoni, Lanzi

AN ACT RELATING TO HEALTH AND SAFETY -- HEALTH CARE FACILITIES

Summary: This act would require nursing facilities to post in a public place in each nursing care unit the number and type of nursing staff on duty and provide an annual report on nursing staff ratios.

Status: Heard and held for further study. Provisions of bill incorporated into H6550A/Public Law 249 and S1135A/Public Law 157 (The Germaine Morsilli Act) and enacted into law.

H5672 (Lt. Governor)

BY Ginaitt, Anguilla, Moura, Lewiss, Naughton

AN ACT RELATING TO HEALTH AND SAFETY -- THE NURSING EDUCATION
SCHOLARSHIP PROGRAM

Summary: This act would help address the shortage of nurses by establishing a nursing education scholarship program to provide scholarships for nurses who agree to work in the health care field for at least two (2) years. This act would take effect upon passage.

Status: Heard and held for further study.

S663 (Lt. Governor)

BY Polisena, Damiani, Goodwin, Gallo, Sosnowski

AN ACT RELATING TO HEALTH AND SAFETY -- THE NURSING EDUCATION
SCHOLARSHIP PROGRAM

Summary: This act would help address the shortage of nurses by establishing a nursing education scholarship program to provide scholarships for nurses who agree to work in the health care field for at least two (2) years. This act would take effect upon passage.

Status: Introduced, referred to Senate Finance

H6197

BY Ginaitt, Anguilla, McNamara, Dennigan

AN ACT RELATING TO HUMAN SERVICES -- NURSING HOMES

(fund a nursing facility quality improvement grant program)

Summary: This act would, for the 2006 fiscal year, allocate two million dollars (\$2,000,000) to the department of human services from provider tax revenues derived from nursing facilities to fund a nursing facility quality improvement grant program. This act would take effect upon passage.

Status: Heard and held for further study.

S520 (Lt. Governor)

BY Perry, Sosnowski, McBurney, Polisena, McCaffrey

AN ACT RELATING TO HUMAN SERVICES -- NURSING HOMES

Summary: This act would, for the 2006 fiscal year, allocate two million dollars (\$2,000,000) to the department of human services from provider tax revenues derived from nursing facilities to fund a nursing facility quality improvement grant program. This act would take effect upon passage.

H5299 (Lt. Governor)

BY Ginaitt, Anguilla, Handy, Gemma, McNamara

AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT -- ELDERLY
PHARMACEUTICAL ASSISTANCE

Summary: This act would reduce the minimum age of social security disability recipients eligible for enrollment in RIPAE to twenty-one (21) years of age.

Status: Heard and held for further study.

S397 (Lieutenant Governor)

BY Goodwin, Issa

AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT

Summary: This act would reduce the minimum age of social security disability recipients eligible for enrollment in RIPAE to twenty-one (21) years of age. This act would take effect upon passage.

Status: Heard and held for further study

H5484

BY Slater, McNamara, Diaz, Moura, Williams

AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT (Community Provider
Index)

Summary: This act, recommended by the Legislative Commission on Community Provider Indexing, would provide certain private community-based organizations with an annual contractual adjustment based upon the average annual percentage prescribed by the CMS Health Market Basket Index for the preceding year and require those agencies to provide

audit results showing how the index funds were spent.

Status: Heard and continued. FY2006 Budget Act (**H5270Aa/Public Law 117**) includes funds to provide a 2.2% provider increase starting in January 2006.

S831

BY McBurney, Levesque C, Paiva-Weed, Alves, Pichardo

AN ACT RELATING TO STATE AFFAIRS AND GOVERNMENT (Community Provider Index)

Summary: This act, recommended by the Legislative Commission on Community Provider Indexing, would provide certain private community-based organizations with an annual contractual adjustment based upon the average annual percentage prescribed by the CMS Health Market Basket Index for the preceding year and require those agencies to provide audit results showing how the index funds were spent.

Status: FY2006 Budget Act (**H5270Aa/Public Law117**) includes funds to provide a 2.2% provider increase starting in January 2006.

H5651

BY Jackson, Sullivan, Rice, Gallison, Church

AN ACT RELATING TO HEALTH AND SAFETY -- HEALTH CARE FACILITIES

(Nursing Home Financial Management and Accountability Act)

Summary: This act would establish "The Nursing Home Financial Management and Accountability Act." This act would specifically empower and authorize the department of health to take certain actions and monitor certain activities with regard to skilled nursing facilities and intermediate care facilities.

Status: Heard and held for further study. Components of bill incorporated into **H6551A/Public Law 226**.

S422

BY Perry, McCaffrey

AN ACT RELATING TO HEALTH AND SAFETY -- HEALTH CARE FACILITIES

(nursing home financial management and accountability act)

Summary: This act would establish "The Nursing Home Financial Management and Accountability Act." This act would specifically empower and authorize the department of health to take certain actions and monitor certain activities with regard to skilled nursing facilities and intermediate care facilities. This act would take effect upon passage.

Status: Heard and held for further study. Components of bill incorporated into **S1137Aaa/Public Law 159**.

H5783

BY Costantino, Carter

AN ACT RELATING TO HUMAN SERVICES -- MEDICAL ASSISTANCE

(increase rates paid to dentists, dental hygienists, & dental assistants providing services to Medicaid-eligible residents of nursing facilities)

Summary: This act would increase the rates paid to dentists, dental hygienists, and dental assistants who provide dental services to Medicaid-eligible residents of nursing facilities.

Status: 04/06/2005 Scheduled for hearing

S0529

BY Alves, Paiva-Weed, Doyle, Tassoni, Goodwin

AN ACT RELATING TO HUMAN SERVICES -- MEDICAL ASSISTANCE

(increase the rates paid to dentists, dental hygienists, and dental assistants who provide dental services to Medicaid-eligible residents of nursing facilities)

Summary: This act would increase the rates paid to dentists, dental hygienists, and dental assistants who provide dental services to Medicaid-eligible residents of nursing facilities. This act would take effect upon passage.

Status: 06/29/05 Scheduled for hearing and consideration.

H5827

BY Costantino, Sullivan, Pacheco, Jackson, Church

AN ACT RELATING TO HUMAN SERVICES -- CARE FOR THE ELDERLY

(program of all-inclusive care for the elderly)

Summary: This act would create a new chapter in the general laws to establish a program for all-inclusive care for the elderly as a optional Medicaid benefit. This act would take effect upon passage.

Status: Passed as Public Law 114

S0815

BY Alves, McBurney, Doyle, Issa, Walaska

AN ACT RELATING TO HUMAN SERVICES -- ALL-INCLUSIVE CARE FOR THE ELDERLY

(authorize and initiate a state program for all-inclusive care for the elderly)

Summary: This act would authorize and initiate a state program for all-inclusive care for the elderly. This act would take effect upon passage

Status: Passed as Public Law 110

H6262

BY Costantino, Naughton, Kennedy, Corvese, McNamara

AN ACT RELATING TO LICENSING OF HEALTH CARE FACILITIES (Medical Directors)

Summary: This act would detail the specific responsibilities of the medical director of a nursing facility and would provide him or her with immunity for reporting to the medical licensure board the conduct of a nurse or physician. This act would take effect upon passage.

Status: Provisions of bill incorporated into Germaine Morsilli Act (**H6551A/Public Law 226 and S1135A/Public Law 157**).

H5574 (Lt. Governor)

BY: Sullivan, Jackson, Davey, Fox, and Gemma

HOUSE RESOLUTION MEMORIALIZING CONGRESS ON MEDICAID IN THE STATE OF RHODE ISLAND

Summary: This resolution opposes changes in the structure of the Medicaid program that would convert the program into a block grant or otherwise impose caps on federal funding or reduce funding to the States. It requests that the Rhode Island Congressional delegation support a FY2006 federal budget that protects both the funding and structure of the Medicaid program

Status: 2/16 Read and passed by House - **Resolution #90**

S298 (Lt. Governor)

BY Gallo, Fogarty P, Walaska, Levesque C

SENATE RESOLUTION ON MEDICAID

Summary: This resolution opposes changes in the structure of the Medicaid program that would convert the program into a block grant or otherwise impose caps on federal funding or reduce funding to the States. It requests that the Rhode Island Congressional delegation support a FY2006 federal budget that protects both the funding and structure of the Medicaid program

Status: 03/29/2005 Senate read and passed - **Resolution #142**

■ ADVOCACY

Nursing Home Reform. In 2005, the Council continued its advocacy for nursing home reform through several pieces of legislation introduced on behalf of the Chairman, including those that called for the accountability of nursing homes' financial

management, the posting of staff levels, and the requirement of national criminal background checks for those working in nursing facilities. Many of these bills (including the Germaine Morsilli Act) were incorporated into what has been called “Long Term Care Reform Act of 2005” which was signed into law on July 5th.

RIPAE Preservation/Wrap-Around - Chairman Fogarty led advocacy efforts to protect RIPAE and coordinate it with the new Medicare Part D Prescription plan, scheduled for launch January 1st 2006. Legislation was introduced on the Chair’s behalf and several press conferences were held throughout the state at various senior centers to bring the effort into focus. The endeavor succeeded in preserving RIPAE so that recipients with Medicare Part D will get assistance from RIPAE with deductibles and the “doughnut hole”.

Social Security Protection. In 2005, the Chairman advocated for the protection of the current Social Security program through its recommended legislative resolutions urging Congress to oppose the privatization of Social Security, which passed in both the Senate and House.

State Budget for FY 2006. The Council’s Work Plan for 2005 contained funding items relating to: (1) securing additional state budget funds to increase access for low income persons to assisted living waivers, (2) beginning the implementation of the RI PACE (Program of All-Inclusion Care for the Elderly) program as a model to demonstrate an integrated care model, and additional funds to ensure sufficient licensing staff at HEALTH to properly enforce long term care standards. The FY 2006 Budget included funds for (6) additional staff for this purpose. The FY2006 Budget Act includes \$314,365 in added state funding for the Department of Elderly Affairs to add 20 units of assisted living per month in its home and community care waiver program starting January 2006 and the PACE Program (passed as Public Law 114 and Public Law 110) recently opened and is now accepting clients.

Provider Index Legislation. The LTCCC Chairman spoke in support of H8454 and S831 at the State House rally held by the Provider Index Coalition. The FY2006 Budget Act (H5270Aa/Public Law 117) includes funds to provide a 2.2% provider increase starting in January 2006.

Support for Legislation/Funding/Hearings. Many letters of support were submitted to appropriate committee and government leaders by the Chairman, including those that called for additional resources for the Office of Facilities Regulation, funding of approved Assisted Living Waivers by Medicaid and a re-balancing of state resources to support home and community-based services as called for in the Chair’s “Real Choices for Rhode Islanders” announced on March 21st. The Chair and Executive Director also provided testimony at Senate and House Committee hearings in support of the Council’s legislative agenda.

MEDICARE Part D

Given the co-pay burden which will be imposed on those persons in Medicaid home and community waiver programs, the Chairman pressed for immediate exemption of co-payments of this group through correspondence to U.S. Department of Health

and Human Services Secretary Michael Leavitt, (Cc'd to the RI Congressional delegation) and contact with Senator Jack Reed.

Home and Community Care

Additionally, the Chair requested a public hearing regarding the proposed revision of Rules, Regulations and Standards governing the Home and Community care program to allow for testimony on proposed changes and supported maintaining the co-pays at their current levels.

HUD Nursing Home Insurance Investigation

The Chairman also appealed to the RI Congressional delegation to seek a full review of HUD statutes, regulations and policies in relation to the safeguards needed to prevent parties from gaining undue financial benefits within the HUD 232 (nursing home mortgage insurance) program. He also requested a review of the findings of HUD's Suburban Mortgage audit by the Attorney General and DOH Director to determine if any action would be appropriate, in regard to Mt. St. Francis Nursing Home.

Notice of Convicted Offenders Residing in Long Term Care/Assisted Living

In a follow-up to the events which lead to a rape and murder at an assisted living facility, the Chairman called on the Departments of Health and Corrections to develop a formal, written protocol that will automatically trigger when felons seek assisted living or nursing home care. The protocols were instituted and Chairman Fogarty will propose legislation in the next session similar to that pending before the Illinois legislature (HB2062) to mandate a formal protocol for such cases.

■ PUBLIC INFORMATION AND EDUCATION

Web Site.

The Council continued to maintain its website accessed through Lt. Governor Fogarty's web site found at: www.ltgov.ri.gov. In addition to information on the activities of the Council including electronic versions of its major reports, the webpage contains extensive information on long-term care services targeted toward consumers and caregivers such as **A Guide to Long-Term Care in Rhode Island.** This comprehensive guide provides information about the types of services that may be needed, their cost, the agencies that may assist consumers and caregivers in accessing and paying for care and guidance in making care choices. It includes a listing of licensed long-term care providers as well as an indexed version of the Pocket Manual of Elder Services published by the Department of Elderly Affairs. It also includes important information on financial and legal issues. The Guide can be found at: <http://www.ltgov.ri.gov/longtermcare/careguide/main.htm>. Additionally, the Long Term Care Coordinating Council meeting minutes are now accessible via the Secretary of State's webpage at <http://www.state.ri.us/> and following the links starting with the "Open Meetings" link found in the "Online Services" menu.

CONFERENCES

Forum: *Booming Into the Future III: Creating a Livable Community*

On September 19th, the Council partnered with AARP RI, the Brown Center for Gerontology and Research, and Fannie Mae to sponsor the third Forum in this hugely successful and well-attended “Booming Into the Future” series. Driving the Council's interest in planning these Forums are the compelling statistics regarding the aging of the “baby boomers” that underscore the need for warm and welcoming living communities that are best suited for their particular needs. Nearly 77 million baby boomers will begin to turn age 65 by 2008 and meeting their long term care needs as they age will require a strong public/private partnership. Below is the agenda for the Forum.

Presenters & Speakers

Phil Zarlengo, Ph.D., State President, AARP-RI

Kathleen Connell, State Director, AARP-RI

Moderators

Vin Mor, PhD. and Susan Allen, Ph.D. - Brown University Medical School

√ Keynote Speaker

Chris Hansen – Group Executive Officer, AARP, Washington, DC

√ Luncheon Speaker

Dr. Bill Thomas – Author, Gerontologist and AARP Visiting Scholar

Panel I – Making Communities Happen

√ To Love Where You Live – David Brussat, Editorial Writer and Columnist, ProJo

√ Get Moving – Mark Therrian, Assistant General Manager of Planning, RIPTA

√ Planning for Livable Communities – John O'Brien, Chief, RI Statewide Planning Program

Panel II – Components of Livable Communities

√ Successful Aging for People Who Use Wheelchairs – Susan M. Allen, Ph.D., Deputy Director, Center for Gerontology and Health Care Research, Brown University

√ Turning the Senior Care Pyramid on its Head – Len Fishman, President and CEO, Hebrew SeniorLife, Boston

√ Universal Design and Modification – William Gordon, Real Estate Developer and Consultant

Public Policy Forum on Culture Change

On June 2nd, the LTCCC hosted a Public Forum (Co-sponsored by the Alliance for Better Long Term Care and in conjunction with Quality Partners of Rhode Island) ***Quality Innovations in Nursing Home Work and Care -The Vision of Culture Change***. The forum focused on culture change as a growing movement to improve quality of life by changing how we care for persons in nursing homes and other human service settings. Over 80 persons attended this very successful conference which was partially supported by the RI Foundation. Below is the agenda for the forum:

Welcome

√ Lt. Gov. Charles J. Fogarty, Chairman - RI Long Term Care Coordinating Council

√ Marcia Petrillo, CEO - Quality Partners of Rhode Island

Making the Case for Culture Change: The Research and Business Case

- √ Marguerite McLaughlin, Project Coordinator
- √ David Farrell, Project Manager Quality Partners of Rhode Island

Panel: The Culture Change Journey: *Why? When? How?*

- √ Sen. Elizabeth Roberts, Moderator
- √ Lori Todd, Administrator, Loomis House, MA
- √ Richard Gamache, Administrator, Elmhurst Extended Care
- √ Karen Schoeneman, Centers for Medicare and Medicaid
- √ Sharon Lounsbury Roberson, Centers for Medicare & Medicaid Services, Region I
- √ Roberta Hawkins, Executive Director, Alliance for Better Long Term Care

The Road Ahead for Rhode Island

- √ Dr. William Waters, Deputy Director, RI HEALTH
- √ Q & A

Emergency Preparedness Roundtable Discussion The Executive Director held a roundtable discussion on Emergency Preparedness in Long Term Care Settings following the November 9th LTCCC Full Council Meeting. The well-attended discussion was productive and participants identified some areas that need addressing and ways for the long term care community to be involved in this issue. They also began a review of the current regulations for emergency preparedness to ascertain if there is a need for any revisions. The Executive Director noted that HEALTH may also consider working with the newly formed Roundtable to do a needs assessment for long term care emergency planning and will provide follow up on this matter to the LTCCC during the year.

Newsletter In the summer, the Council published an edition of its newsletter, ***Rhode Island Long-Term-Care Briefs***, reporting on legislative actions, state funding for long term care and program activity dealing with long-term care and other related matters. The newsletter is distributed to about 3,000 individuals and/or aging service agencies.

Public Presentations and Media Events

In an effort to keep the public informed on issues and policy relating to long-term care and the work of the Council, the Chairman and Executive Director participate in many public forums, press conferences, visits to local senior centers and other meetings and events. In 2005, these activities included:

Presentations regarding long term care and aging-related policy issues were made to: The RI Forum on Aging, The Legislative Commission for the Safety and Care of the Elderly Person, Leadership Rhode Island's Healthcare Day, CareLink's 2005 Annual Meeting, members of the Ralph J. Holden Community Center, VNA Home Health Services Centennial Dinner, The RI Chronic Care Collaborative Outcomes Congress, The Alzheimer's Association and DEA's State House reception for Caregivers Month and Alzheimer's Awareness Month, and RI The Forum on Aging and DEA's Emergency Preparedness for the Elderly. A presentation on the Fall Prevention Partnership was also given at the RIAFSA's all-day conference.

Chairman Fogarty also participated in several media shows to discuss nursing home and related legislation as well as other long term care related issues. These included The Steve Kass show, The “13th State” with Paul Zangari, Jack White’s news stories on fingerprinting for nursing home employees and the status and safety for residents and staff in assisted living facilities (a follow up to Beechwood Assisted Living incident), Joe Vilano’s Who Show, Metro News, and Bill Rappley’s report regarding the HUD Inspector General’s report on Hillside Health Center.

Additionally, the Chairman held several news conferences to announce and urge support for his proposed RIPAE Wrap-Around and preservation legislation (S-522 and H-5332) and to promote his ‘Real Choices for Rhode Islanders’ Plan in which home and community care services would be provided to 500 seniors and persons with disabilities at the same amount it would cost to provide nursing home care to one third that number of people,

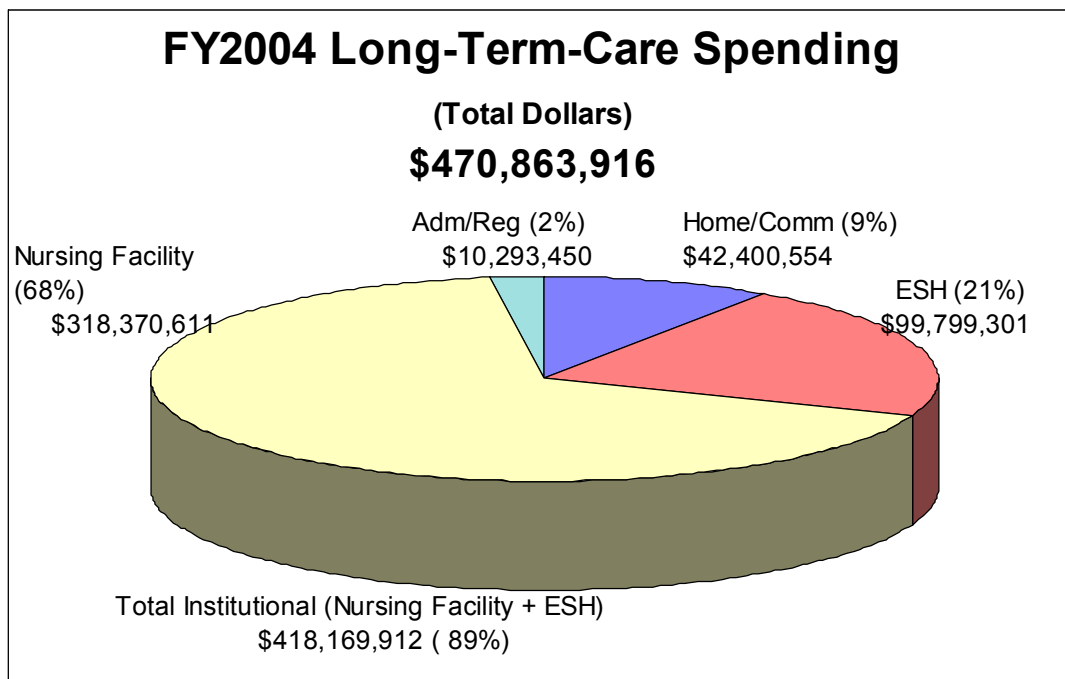
■ **PLANNING, RESEARCH AND POLICY DEVELOPMENT**

2005 Work Plan.

At its January 12th meeting, the Council approved its 2005 Work Plan. The Work Plan is driven by the goals, objectives and guiding principles of the ***Council's State Plan for Long-Term Care***. Section 3 contains the 2005 Work Plan and an end-of-year status report on progress made in carrying out its action steps.

Long-Term-Care Budget.

In June, the Council released its eighth annual spending report, ***Rhode Island Long Term-Care Spending: FY2004*** which details long term care expenditures across four state departments including funds spent for institutional care, home and community services, regulatory functions and selected administrative and support services. The report also provides selected data on service use. The report for FY2004 showed total spending was \$470,863,916, a 11% increase from FY2003. Notably, the spending growth rate for home and community care services seen in reports of the past several years came to a halt. Also, annual licensing surveys for assisted living and home care and home nursing care providers were not done for a substantial number of these providers. The full report is available in the publications section of the long term care webpage at: <http://www.ltgov.ri.gov/longtermcare/lccmain.htm>. A chart showing the distribution of the spending is presented below.



Falls Prevention Task Force and RI Fall Prevention Partnership

Fall prevention had been identified by the Council in 2003 as an area suitable to implement its Work Plan objective related to a statewide disability prevention initiative and the Council formed a Falls Prevention Task Force to plan activities to reduce the incidence of falls among the state's elder residents.

Since the formation of the RI FALL PREVENTION PARTNERSHIP in 2004, several successful training activities organized by Partner members have been held. These have included two trainings on "Exercised-based Fall Prevention" held in August and September of 2004 (sponsored by the RI Assisted Living Association with the Council as co-sponsor) and Preventing Falls in Older Adults – 2004 – Train the Trainers, held in May 2004.

The most recent workshop, *Fall Prevention Through Behavior Change*, sponsored by the LTCCC and CareLink (partially supported through a grant from Blue Cross Blue Shield of RI) was held May 27th at the Radisson Airport Hotel in Warwick. This well-attended and successful workshop, lead by Dr. Patricia Burbank, focused on Behavior Modification strategies as means of reducing disability and chronic conditions. Participants were trained how to:

- √ Describe the Transtheoretical Model of Behavior Change as it applies to exercise and fall prevention.
- √ Assess stages of change for exercise behavior.
- √ Discuss processes and strategies for exercise behavior change among older adults.
- √ Tailor strategies for exercise behavior change to identified stages of change.

The Partnership Partners include: AARP – RI, Alliance for Better Long Term Care, Alzheimer's Association, RI Arthritis Foundation, Blue Cross Blue Shield of RI, Horizon

Bay Senior Community, Hospital Association of Rhode Island, Jewish Seniors Agency, Long-Term Care Coordinating Council, Quality Partners of RI, RI Adult Day Services, RI Association of Facilities & Services for the Aging, RI Department of Elderly Affairs, RI Department of Health, RI Health Care Association, RI Housing, RI Department of Human Services, RI Department of MHRH, RI Medical Society, RI State Nurses Association, RI Partnership for Home Care, RI Senior Center Association, Shalom/Shalom II Housing, URI College of Nursing, URI College of Pharmacy, URI Department of Physical Education & Exercise Science, URI Physical Therapy Program and the Village Retirement Communities.

White House Conference on Aging – LTCCC Participation – Several current and former LTCCC members and the Executive Director of the LTCCC were appointed as delegates or alternates to the White House Conference on Aging. These included: Kathleen Connell, Anne Gardella, Angelo Rotella, Corinne Calise Russo, Maria Barros, Sister Marietta Walsh, and Maureen Maigret.

This, the 5th such WHCoA conference, was held December 11-14 in Washington , D.C.. Its purpose was to make recommendations to the President and Congress to help guide national aging policies for the next ten years and beyond. In preparation, many LTCCC members participated in the DEA's Listening Session for the WHCoA and attended the RI Work Group for the White House Conference on Aging Mini-Convention.

Long Term Care Quality Measurement and Reporting. In 2001, HEALTH established a Nursing Home Measures Subcommittee to assist in developing measures and a public report to implement the "Health Care Quality Program" that requires HEALTH to implement a quality performance measurement and reporting program for all licensed health care facilities. The Council's Executive Director and several Council members serve on this Committee. Using the Centers for Medicare and Medicaid (CMS) national measures on nursing home clinical performance the Committee implemented a state specific web-based nursing home quality reporting program using a three-diamond rating system similar to that developed for hospital reporting. Results are on HEALTH's website at: www.health.ri.gov/chic/performance/nursinghome.php. During 2005, the Nursing Home Measure Subcommittee continued its work to develop the first statewide survey and report on nursing home resident/family satisfaction. A pilot survey of family members and residents was completed in 2005. A full survey with a public report of results is anticipated for 2006. In 2004 another Committee convened by HEALTH worked to develop a state specific quality report for Medicare certified home care providers using the new data being reported publicly by CMS as part of its Home Health Quality Initiative. Eleven clinical measures are reported using the same three-diamond scale developed for hospitals and nursing homes. Go to: <http://www.health.state.ri.us/chic/performance/homehealth/index.php> to view the report. The next step will be to develop a consumer satisfaction survey program for home care.

SHAPE II SME Panel on Nursing Workforce

In 2004 the Council's Executive Director served as a member of Subject Matter Expert Panel for the SHAPE Foundation's Nursing Workforce Study. The study's sobering conclusions, included in a report titled, **HELP WANTED: The Growing Crisis in**

Rhode Island's Nursing Workforce found a nursing shortage of roughly 8 percent in Rhode Island. By 2010, the shortage could reach 25 percent, and by 2020, Rhode Island could have fewer than half the nurses—both RNs and LPNs—it needs to meet Rhode Island's healthcare demands. These findings are significant for the state's long term care sector. In 2005, the Executive director participated in a continuing Work Group to explore actions to address these predicted shortages.

Section 3. LTCCC WORK PLAN 2005 – End-of-Year Status Report

The Council adopted an official Work Plan for 2005 at its January meeting that contained 19 Action Items. A status report on this Work Plan follows.

2005 Work Plan End-of-Year Status Review

These recommended Actions are based on the principles, goals and objectives of the Long-Term-Care Coordinating Council's State Plan. In many instances they are activities initiated or recommended in previous years but not yet fully implemented. Implementing the Action Steps requires the cooperation and collaboration of all the public and private participants involved in the work of the Council.

SYSTEM INFRASTRUCTURE

1. Develop and implement a long-term-care information system, including resource needs, which will serve as interdepartmental data and planning resource for long term care. **Lead agency: DHS**

End-of-Year Progress Report: This project, referred to by DHS as the "data module" will create an "Information System" warehouse. DHS is in the process of finalizing a draft RFP which is being reviewed by the state's chief IT Officer. The project is a three-year one with an estimated cost of \$10 \$15 million to be financed under Medicaid at a 90% fed/10% state match. It is anticipated that in

April

2006 a contract will be awarded for the first level which will integrate claims and assessment data for DHS and DEA and some data from MHRH. The 2nd level will connect additional data available in

these

departments and the final level will build in web-based enrollee eligibility.

2. Implement a statewide computerized long-term-care information resource guide with public, consumer-friendly interactive web access. **Lead Agencies: DHS and DEA**

End-of-Year Progress Report: www.ThePointRI.org became operational on November 1st. The website provides resource information on programs and services for elders and persons with disabilities. Interactive capability will be added in the future. DHS is in contract negotiations with SAIC and expects to have the web-based directory and benefit screener live by July, 2006.

3. Support adequate resources for HEALTH to comply with state and federal long term care survey requirements and to investigate complaints in a timely and effective manner.
Lead Agency: HEALTH and LTCCC

End-of-Year Progress Report: HEALTH added (1) FTE to do assisted living surveys in February

2005 bringing the level to 2.3 FTE's for assisted living. The LTCCC also brought to the attention of the House and Senate Finance Committees at budget hearings the lack of capacity at HEALTH to do annual surveys for home care and home nursing care providers. FY2006 state budget included funding for six (6) additional regulatory staff which was supported by LTCCC. HEALTH reports that in first quarter of FY2006, 65 assisted living residences (95%) were inspected at least once; however, annual surveys of home care and home nursing care providers as required by law are not being accomplished.

4. Support implementation of system-wide long-term care entry system as mandated by RIGL 42-66-4(b) and envisioned in "ONE STOP" grant project to include the resources and policy reforms needed to adopt a statewide counseling and assessment program for long term care. **Lead Agency: DEA**

End-of-Year Progress Report: The development of a central facility for the "ONE-STOP" center is delayed for several years as the November 2004 bond issue to renovate space on the Pastore campus in Cranston did not pass. The DEA automated case management system (SAMS/Synergy) has been upgraded, all case management agencies are online and a uniform assessment tool is being used. The implementation process of a state-wide entry system is in operation with the opening of **The Point**. The Point is a statewide access and referral program implemented through a central call center. The Point opened for operation on November 1st and provides information, resources, counseling, and direction to adults with disabilities, care givers, and elders. The telephone number is 401-462-4444. DEA is the lead agency in developing this approach to providing "one stop shopping" and its partners are DHS, DOH, and MHRH. The goal of the program is to deliver information by linking callers with available and appropriate resources without duplication of effort and to empower individuals to make informed choices and streamline access to long term support. Six access assistance staff persons have also been placed in community agencies to allow for handling calls on weekends and evening hours. With regard to policy reforms, staff at DEA are meeting with staff at DHS in order to develop a more streamlined long term care entry system.

5. Support funding in FY06 budget to begin to implement RI PACE (Program of All-Inclusion Care for the Elderly) program as a model to demonstrate an integrated care model. **Lead Agencies: DHS and LTCCC**

End-of-Year Progress Report: Funding included in FY2006 budget to begin implementation of PACE. Legislation introduced and passed in House and Senate (H5827 by Rep. Costantino and S815 by Sen. Alves) to add PACE program to state Medicaid plan. PACE enrollment to begin and program site scheduled to on December 1, 2005.

6. Continue to review service use and to identify needs of minority elders. **Lead Agencies: LTCCC, DEA, Minority Elder Task Force**

End-of-Year Progress Report: "Report of a Survey of Services Available and Accessible to Minority Elders in R.I." was completed in March by the RI Minority Elder Task Force with assistance of LTCCC staff and state and community agency members.

7. Continue to review state long term care spending and utilization trends and to study system demand and capacity for addressing future needs including those of "baby boomers". **Lead Agencies: LTCCC, DEA, AARP**

End-of-Year Progress Report : "Long Term Care Spending FY2004 Report" prepared by LTCCC and issued in June includes section on provider trends and aging population projections. BOOMING INTO THE FUTURE III, sponsored by AARP and co-sponsored by LTCCC and Brown University was held on September 19th and included expert presentations and discussion of needs for support services including housing and transportation.

8. Continue to implement 1998 Health Care Quality Measurement and Reporting Law as it relates to long-term-care facilities. **Lead agency: HEALTH**

End-of-Year Progress Report: LTCCC members continued to serve on Nursing Home Measures Subcommittee which continued its work under the leadership of Quality Partners of RI and HEALTH. A pilot family satisfaction survey for nursing homes and a pilot nursing home resident satisfaction was completed. HEALTH also initiated work to develop a statewide consumer satisfaction design for home health care.

9. Continue to address long-term care workforce issues, including professional nurse shortage in long-term care industry and issues relating to certified nursing assistants. **Lead Agency: LTCCC, HEALTH, DHS and provider organizations**

End-of-Year Progress Report: Legislation recommended by LTCCC introduced to (1) expand Nurse Reward program to forgive loan or portion of loan and to add nurse educators to those eligible for program (H5295 by Rep. Ginaitt and S203 by Sen. Polisena), and (2) to create a state nurse scholarship program (H5672 by Rep. Ginaitt and S663 by Sen. Polisena). Legislation was continued for further study. Funding was included in state FY2006 budget to continue expansion of nursing education faculty at state colleges. LTCCC Executive Director serves on Work Group formed to do follow-up to SHAPE II Nursing Workforce Study.

10. Support efforts to continue to work toward fair and rational payment methods for all long term care providers. **Lead Agencies: LTCCC, Provider and advocacy groups**

End-of-Year Progress Report: LTCCC supported legislation to implement community provider index (H5484 by Rep. Slater and S831 by Sen. McBurnery). Chairman Fogarty proposed 3% COLA for home and community care providers as part of REAL CHOICES proposal addressing home and community care infrastructure. LTCCC supported Resolution (S1138 by Sen. PaivaWeed and H6552 by Rep. Al Gemma directing DHS to study home and community need and reimbursement. The Resolution passed the legislature in June and DHS engaged NESCSO to conduct a survey of rates and rate methodologies for community-based LTC services across the New England states. Information from the survey is expected to be ready at the end of November.

SYSTEM COMPONENTS

Nursing Facilities

11. Implement recommendations of the Nursing Facility Closure Task Force through legislation, administrative policy, advocacy and support for funding as appropriate. **Lead agency: LTCCC**

End-of-Year Progress Report:

- “Germaine Morsilli Act” introduced at request of Chairman Fogarty (H5181 by Rep. McNamara and S67 by Sen. Perry) to implement many of the recommendations of the LTCCC Nursing Facility Closure Task Force. Members of LTCCC advocated for passage of the “Morsilli Act” and subsequent legislation containing elements from “Morsilli Act” were incorporated into the 2005 Long Term Care Reform package crafted by the Joint Committee on Health Care Oversight (H6550/S1135, H6549A/S1134Aaa, H6548Aaa/S1136A, H6551A/S1137Aaa).
- Legislation was introduced at the request of Chairman Fogarty to (1) fund a Quality Improvement program (S520 by Sen. Perry and H6197 by Rep. Ginaitt).
Although this legislation did not pass, the Rhode Island Health Care Association worked with the RI State Nurses Association to offer a long term care nurse leadership training program
- Legislation requiring posting of nurse staff in nursing homes and annual reporting on nurse staff levels (S553 by Sen. Roberts and H5726 by Rep. Ginaitt) was introduced. These requirements as well as reports on use of pool staff were included in final version of the “Germaine Morsilli” Act
- Legislation was introduced to create a Long Term Care Improvement Fund with monies received from Civil Monetary Penalties assessed against nursing homes (S139 by Sen. Connors and H5300 by Sen. Slater). This legislation was continued for further study.

- LTCCC partnered with Quality Partners of RI and the Alliance for Better Long Term Care to sponsor Policy Forum “QUALITY INNOVATIONS IN NURSING HOME WORK AND CARE: The Vision of Culture Change” on June 2nd. The Forum introduced a broad audience of about 80 persons including legislators, advocates, consumers, providers and state agency staff to the concepts of Culture Change through presentations from providers employing culture change concepts, regulators and advocates.

12. Continue to address problems in providing oral (dental) health care for nursing home residents, other long term care clients and elders with low incomes and to seek viable solutions to address the service gaps in this area. **Lead agencies: DHS, Providers, Alliance for Long Term Care and Senate Commission on Oral Health**

End-of-Year Progress Report: Legislation supported by LTCCC to increase Medicaid provider payments for dentists caring for nursing home residents was introduced (H5783 by Rep. Costantino and S529 by Sen. Alves), but failed to pass. LTCCC members participated in DHS-funded Policy Work Group led by RI Foundation to address the issue and develop solutions. This effort resulted in a report: “Oral Health Care in Rhode Island Nursing Homes: the Crisis and Possible Solutions” published by the RI Foundation. Based on discussions with both legislative Finance Chairmen and the Governor’s office, DHS agreed to proceed to develop and issue an RFI (Request for Information) and RFP (Request for Proposals) for an entity(ies) to develop one or more delivery system(s) to address the oral health needs of nursing home residents. A draft RFI has been developed and is under review; the RFP will follow within 2-3 months, based on responses to the RFI. This initiative is currently unbudgeted so will need to be addressed in the context of the FY2007 budget deliberations, once RFP responses have been received and analyzed.

Home and Community Services

13. Continue to promote adequate and equitable funding for home and community-based services including supportive services such as information and counseling, transportation, supportive housing and family caregiver assistance programs that allow persons to remain in home and community environments.

End-of-Year Progress Report: Chairman Fogarty proposed “REAL CHOICES” plan to address gaps in funding for home and community services to include funds to end waiting lists for assisted living waiver program and respite services and to strengthen case management services. LTCCC supported Resolution put forward by Joint Committee on Health Care Oversight directing DHS to engage consultant to conduct a study “to determine the full scope of need for long-term care services to include, but not be limited to, home care, adult day centers, accessory family dwelling units, respite services, assisted living residences and nursing facilities”...and “to include a review and recommendations of appropriate financing structures that will ensure access to services for those in need of community-based long-term care.” (S1138 by Sen. PaivaWeed and H6552 by Rep. Al Gemma). The Resolution passed the legislature in June. DHS reports that it is working to retain a national consultant to review the state’s LTC policy and service landscape, and that should be accomplished by early December.

- 13.1. Work to secure additional state budget funds to increase access for low income persons to assisted living waivers and study funding methods for assisted living services in order to reach a consensus for reimbursement for this service in future years.

Lead agency: LTCCC

End-of-Year Progress Report: Legislation recommended by LTCCC introduced to fund additional approved assisted living waiver units (H5142 by Rep. Gallison and S262 by Sen. Alves). Legislation continued for further study. Funding to address waiting list for Medicaid-supported assisted living also included in “REAL CHOICES” plan proposed by Chairman Fogarty. FY2006 state budget included \$700,000 in added funds for Department of Elderly Affairs to add 20 additional units of Medicaid waiver assisted living “slots” administered by DEA from January to June of 2006 for a total of 120 units.

13.2. Support implementation of a community provider index as recommended by Legislative Study Commission. **Lead agency: Commission Chairman, Providers**

End-of-Year Progress Report : Chairman Fogarty and LTCCC supported legislation to implement community provider index (H5484 by Rep. Slater and S831 by Sen. McBurney). Legislation did not pass. FY2006 budget included funds to provide a 2.2% community provider increase starting in January of 2006.

14. Review survey of health needs of persons using the state enhanced SSI program for assisted living and develop a plan to meet those needs.

Lead agencies: LTCCC and DHS

End of Year Progress Report: DHS prepared report and shared the results of survey findings with LTCCC and other appropriate entities. OHHS is researching policy options for persons with behavioral health problems in assisted living and will issue its findings in early 2006.

Rx DRUGS

15. Continue to advocate for affordable Rx drugs for the elderly and persons with chronic illnesses.

Lead agency: LTCCC

End-of-Year Status Report: Legislation reintroduced to expand RIPAE for persons on SSDI below age 55 years (by S397 Sen. Goodwin and H5299 by Rep. Ginaitt). Legislation heard and held for further study.

16. Examine potential impact of federal Medicare Reform (MMA) on state RIPAE and Medicaid program and suggest state action as appropriate.

Lead agencies: DHS and DEA

End-of-Year Progress Report: Legislation introduced at request of Chairman Fogarty by Sen. Roberts (S522) and Rep. Sullivan (H5332) to authorize state to provide fund “wrap round” program under RIPAE to coordinate with Medicare Part D. Legislation heard and held for further study. FY2006 Budget bill included Article 28 to require RIPAE enrollees who meet the financial criteria for the Medicare Part D low-income benefit (“Extra-help”) to apply for the benefit. RIPAE will continue to be available to those who enroll in Medicare Part D to assist with required deductibles and coverage gaps. The Department of Elderly Affairs is conducting a re-enrollment for RIPAE and offering numerous training and education programs to assist beneficiaries in making decisions regarding Medicare Part D choices.

FINANCING

17. Continue to examine the role of and promote long-term-care insurance in financing long-term care.

Lead agency: LTCCC

End-of-Year Progress Report: Legislation introduced to provide for a state tax credit for long term care insurance premiums (S 658 by Sen. Roberts and H5294 by Rep. Ginaitt). Legislation heard and held for further study.

18. Continue to seek federal reform to provide equitable payment in Medicare and Medicaid for funding for long-term-care and skilled nursing and therapeutic services and to oppose proposed federal reforms in Medicare and Medicaid harmful to consumers and providers and that would negatively impact state finances.

Lead agency: LTCCC

End-of-year Progress Report: Resolutions requested by Chairman Fogarty introduced and passed memorializing Congress delegation to oppose Bush administration proposed cuts to Medicaid and reforms that would harm system (H5574 by Rep. Sullivan and S298 by Sen. Gallo). Chairman Fogarty also called on Congress to amend Medicare Part D to eliminate co-payments for medications for persons on home and community waivers.

DISABILITY PREVENTION

19. Continue to coordinate activities of RI Fall Prevention Partnership including sponsorship of Fall Prevention Conference focused on Behavior Modification strategies as means of reducing disability and chronic conditions.

Lead agency: LTCCC

End-of-year Progress Report: LTCCC members supported Fall Prevention projects as follows: (1) In February, RI Health Care Association, with the assistance of Quality Partners of RI, sponsored training on Fall Prevention for its long term care nurses; (2) Shalom Housing implemented its fall prevention in Senior Housing demonstration; (3) RI Association of Facilities and Services for the Aging sponsored a 'Best Practices' session on Fall Prevention for senior Housing, adult day services and home settings at its annual meeting in April. LTCCC and CARELINK, with partial grant funding from RI Blue Cross Blue Shield, sponsored a workshop on "Behavior Change and Fall Prevention" in June; (4) many LTCCC members participated in the Fall Injury Prevention Task Force created by HEALTH and the Office of the Lt. Governor as part of the work of HEALTH's Injury Advisory Committee (IAC). The Task Force developed objectives for Fall Prevention for Seniors living in the community which were approved by the IAC and incorporated into the state's CDC grant application. To view these objectives, go to <http://www.fallprevention.ri.gov/>

Appendix I

Long Term Care Coordinating Council

Highlights of Accomplishments
1987 - 2004

1987

- ◆ *P.L. 87-117 creates Long Term Care Coordinating Council*

1988

- ◆ *Standards established for Long Term Care Insurance*
- ◆ *Case Management system created Nursing Home Receivership Law*

1989

- ◆ *SSI special benefit for residents of Sheltered Care*
- ◆ *Bed priority protection for nursing home residents admitted to hospitals*

1990

- ◆ *Stronger standards for Sheltered Care Facilities*
- ◆ *Consumer protections added to Long Term Care Insurance law*
- ◆ *Facilitated formation of Rhode Island Association for Senior Housing Managers (RIASH)*

1991

- ◆ *Criminal background checks for employees of Long Term Care Providers*
- ◆ *Exploitation added to abuse in Health Care Facilities Act*
- ◆ *Family Caregiver Training Program*

1992

- ◆ *Broadened Residential Care/Assisted Living services*
- ◆ *Instigated new nursing home bed need study by Health Department*

1993

- ◆ *Completed draft of comprehensive State Long Term Care Plan*
- ◆ *Successfully advocated to prevent closing of wards at Eleanor Slater Hospital*
- ◆ *Alzheimer's Special Care Unit Disclosure Law*

1994

- ◆ *Published **Long Term Care 1995-2000, Working Together Making All the Pieces Fit.***
- ◆ *Task Force on Medications in Nursing Facilities*
- ◆ *Mandated Continuing Education for Administrators of Nursing and Residential Care/Assisted Living Facilities*

1995

- ◆ *Milbank Memorial Fund Collaboration Project Begins*
- ◆ *State Long Term Care Ombudsman Statute*
- ◆ *Task Force on Licensing of Home Care Providers*

1996

- ◆ *New Umbrella Law for Licensing Home Care Providers*
- ◆ *Advocated protection of federal Nursing Home Standards*

1997

- ◆ *Promoted \$1.7 million increase in state budget for Long Term Care*
- ◆ *Provider/Physician Disclosure laws*
- ◆ *Facilitated "Choices Coalition" Long Term Care Planning Law*
- ◆ *Passage of "RI Housing Assisted Living Waiver" (PL97-198)*

1998

- ◆ *Secured \$50,000 to develop home care ombudsman program*
- ◆ *Enacted home care "bill of rights" law*
- ◆ *Obtained \$300,000 to fund mental health services for at-risk older adults*
- ◆ *Increased payments for SSI enhanced residential care/assisted living services*

- ◆ Requirement for certification of residential care/assisted living administrators
- ◆ Creation of family caregiver resource network and \$150,000 new funds for caregiver support and respite
- ◆ Added drugs for Alzheimer's Disease to RIPAE
- ◆ Set new goals and values for state long term care
- ◆ Designated DEA as central agency to coordinate community-based long- term care entry system
- ◆ Increased funds for home care and Meals on Wheels

1999

- ◆ Increased payment rates for Home Care Providers
- ◆ Increase Medicaid eligibility to 89% FPL
- ◆ Increased Personal Needs Allowance for Nursing Home residents by \$10/month
- ◆ Added drugs to treat depression to RIPAE
- ◆ Required HEALTH be notified of pending labor action and approve facility response plan
- ◆ Required ten percent of nursing home surveys be done in non-standard hours and bi-monthly inspection of facilities with sub-standard care
- ◆ Strengthened rights of assisted living residents
- ◆ Required HEALTH to submit annual report on long-term care regulatory activities
- ◆ Secured additional funds for the following:
 - \$200,000 for home modifications for persons with disabilities
 - \$85,000 additional funds for ombudsman program
 - \$48,400 for Meals on Wheels
 - \$24,750 for respite care

2000

- ◆ Raised Medicaid income eligibility for the elderly and persons with disabilities to 100% of the federal poverty level
- ◆ Created the RIPAE PLUS component of RIPAE to offer state co-payments for RIPAE eligible drugs to elders up to \$34,999 (single) and \$40,000 (married)
- ◆ Added anti-infectives and drugs to treat arthritis to RIPAE
- ◆ Secured \$85,000 to expand the elder care information specialists network
- ◆ Secured \$85,000 to initiate a new Volunteer Guardian Program
- ◆ Supported creation of DEA Center on Diversity
- ◆ Strengthened assisted living license law and changed name from "residential care and assisted living" facility to "assisted living" Residence

2001

- ◆ Released "Crisis in Care: A Report of the CNA Study Group" a report prepared by a Council Work Group that included a ten-step set of recommendations to address the direct care staff crisis
- ◆ Advocated for a long-term-care direct care staff compensation pass-through which resulted in \$10 million in funding in the FY2002 budget targeted specifically for this purpose
- ◆ Supported legislation to expand the RI Pharmaceutical Assistance Program (RIPAE) to include drugs to treat osteoporosis and to add a catastrophic benefit under which RIPAE pays for 100% of covered drugs once an enrollee spends \$1,500 out of pocket on RIPAE covered drugs (passed)
- ◆ Supported legislation to seek approval for adding 180 persons to the state Assisted

Living Medicaid Waiver program (passed)

- ◆ *Published "A Guide to Long-Term Care Insurance"*
- ◆ *Presented "Future Directions for Long-Term Care: A Public Policy Conference", a half day forum featuring noted long-term care experts*

2002

- ◆ *Successfully supported legislation to extend state discounts to RIPAE enrollees for all Rx drugs purchased not just those covered by state co-pay*
- ◆ *Successfully supported legislation to allow persons age 55 to 64 years to enroll in RIPAE for purposes of purchasing Rx drugs at state discount*
- ◆ *Successfully supported legislation to require the state to submit a Medicaid waiver (PHARMACY PLUS) to allow low-income elders to participate in new Medicaid Rx drug program*
- ◆ *Developed and won passage of comprehensive revisions to state assisted living licensing law*
- ◆ *Hosted Medicare Roundtable with RI Congressional representatives to provide forum for addressing serious issues with Medicare including provider reimbursement issues and lack of Rx drug benefit*

2003

- ◆ *Advocated for modernization of nursing home Principles of Reimbursement to provide a phase in of new payment system over three years at cost of about \$30 million – first year cost of about \$20 million included in FY2004 budget*
- ◆ *Strengthened RIPAE to include a 15% state co-pay for eligible Rx's for persons on SSDI between ages 55 and 64 years*
- ◆ *Coordination of benefits law passed allowing persons on RIPAE to have coverage for Rx drugs not covered by private plan*
- ◆ *Created funding program to provide elder immigrants not eligible for Medicaid with nursing home care*
- ◆ *Legislation to strengthen long term care ombudsman law*

2004

- ◆ *Convened 12-member Task Force of the LTCCC to investigate the closing of Hillside Health Center in Providence.*
- ◆ *Issued report "Hillside Health Center: Doors Closed, Lessons Learned" making 42 recommendations for nursing home reforms*
- ◆ *Formed Statewide Fall Prevention Partnership; developed a Fall Prevention Partnership website: www.fallprevention.ri.gov; sponsored a Fall Prevention "Train the Trainer" Conference and Fall Prevention Training Manual*
- ◆ *Passage of legislation to (1) make permanent provisions relating to Coordination of Benefits between RIPAE and private health insurance and (2) prohibit nursing homes from imposing a bedhold charge greater than Medicaid rate for up to five days for nursing home residents on Medicaid*
- ◆ *Secured \$850,000 in FY2005 budget to end freeze on DEA co-pay program*

Appendix II

In October of 1994, the Long Term Care Coordinating Council issued **A Long Term Care Plan for Rhode Island 1995-2000: Working Together to Make the Pieces Fit**. The Plan's principles and goals are list below.

Principles

1. To recognize that the need for long term care will continue to grow, and continue to be a major budget concern for the state.
2. To expand efforts that support the many Rhode Island families who shoulder the burden of providing care for a loved one.
3. To shape services to fit the consumers and their situations.
4. To redesign the way that long-term care services are paid for, in such a way that promotes prevention, early screening, and care in the most appropriate and least costly ways.
5. To adopt a uniform set of questions to be used by a network of qualified and objective 'screeners/case managers' who will work with families to determine their needs and the best possible options for care.
6. To continually improve the quality of care provided, taking into account consumer satisfaction, and seeking high standards for state oversight.
7. And, in every way, to attempt to help people in need by clearing away unnecessary hurdles to receiving care in the most appropriate and timely fashion.

Goals

1. Life with maximal independence and dignity for all older Rhode Islanders who have limitations as a result of chronic conditions and for younger adults who have similar limitations and who utilize the same service system and supports.
2. A flexible, responsive and affordable state long term care service network.
3. A high quality long term care service system that can demonstrate cost effective results.